

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
|                           | EA       |        | 10-01-01 |
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 48     | 10/10/01 |
| FORMALITY REVIEW          | H-5      | 866    | 10-22-01 |
| RESPONSE FORMALITY REVIEW |          |        |          |
|                           |          |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim                          | Date |
|--------------------------------|------|
| Final<br>Original<br>1 3/26/04 |      |
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| Claim             | Date |
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| Claim             | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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10-22-01